LETTER TEMPLATE TO REQUEST AN EVALUATION



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Parent/Guardian's Name Address City, State, ZIP Code Daytime Telephone
Today's date
Name of Special Education Coordinator Name of School Address City, State, ZIP Code
Dear [Name of Special Education Coordinator],
I am the parent of [child's name] who is in [grade level]. [Child's name]'s date of birth is I write to request an evaluation to determine my child's eligibility for special education and related services under the Individuals with Disabilities Education Act and/or Section 504 of the Rehabilitation Act of 1973.
[Child's name] was diagnosed with [illness] by [doctor's name.] My child has missed days of school due to [explain the reasons— hospitalization, feeling unwell, doctor's appointments, etc.]. In that time, I have noticed [name specific symptoms that your child has experienced and explain how your child's symptoms interfere with his or her educational experience]. These challenges have negatively impacted my child's educational performance.
I request this evaluation because [describe suspected academic challenges and give specific examples from personal experience].
I will contact you by [date] to follow up on this request. You can reach me during the day at [phone number] or via email at [email address]. Thank you for your assistance.
Sincerely, [Parent/Guardian name]